

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>60461</i>	<i>4/28/99</i>
O.I.P.E. CLASSIFIER		<i>5</i>	<i>5-4-99</i>
FORMALITY REVIEW	<i>732</i>	<i>88518</i>	<i>5/12/99</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
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41	✓
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48	✓
49	✓
50	✓

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
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41	✓
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48	✓
49	✓
50	✓

Claim	Date
Final Original	
101	✓
102	✓
103	✓
104	✓
105	✓
106	✓
107	✓
108	✓
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136	✓
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138	✓
139	✓
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142	✓
143	✓
144	✓
145	✓
146	✓
147	✓
148	✓
149	✓
150	✓

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)